



Buckskin Horse Association of Michigan
Stallion Service Sale–INFORMATION SHEET
Betty Crowell – Chairman **2009**

Important! This Information will be used for advertising.
Please complete this form and return it with the signed contract and photo to:

Betty Crowell
4868 W Walker Rd
St Johns, MI 48879

989-224-4692 (home)
517-285-8750 (cell)
[**crowell@bkbranchq.com**](mailto:crowell@bkbranchq.com)

Name of Stallion: _____ HYPP N/N or N/H
(circle one)

Breed: _____ Color: _____ Year: _____

Registry's: _____ Email: _____

Reg# _____ Website: _____

Sire's Name: _____ Dam's Name: _____

Breeding Fee: _____ or (circle) Private Treaty- **AQHA IF Fund** **Yes** **No**

Chute Fee (If any) _____ Mare Care: Wet _____ Dry _____

Cooled Shipped Semen: Yes No If Yes, any additional costs? _____

Frozen Semen: Yes No If Yes, any additional costs? _____

Recorded Owner of Stallion: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Day: _____ Telephone Evening: _____

Stallion Standing At (Farm Name) if not same as owner: _____

Stallion Manager or Contract: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Day: _____ Telephone Evening: _____

Nominated for other futurities: _____

Show Record: _____

Record of Get: _____

Special Notes: _____
